

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # J13357	
1. Entity Name LOGOGRAM, INC.	

Principal Place of Business 285 W. CENTRAL PKWY. STE. 1730 ALTAMONTE SPRINGS, FL 32714 US	Mailing Address 285 W. CENTRAL PKWY. STE. 1730 ALTAMONTE SPRINGS, FL 32714 US
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03102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

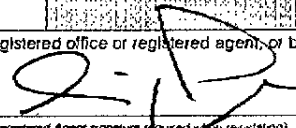
4. FEI Number 59-2673252	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

PUPO, ANTHONY J
285 W. CENTRAL PKWY.
STE. 1730
ALTAMONTE SPRINGS, FL 32714

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Anthony J. Pupo, Pres/CEO  DATE: 3-10-06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retaining)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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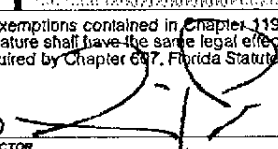
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PUPO, TAMELA M 285 W. CENTRAL PKWY., STE. 1730 ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PUPO, ANTHONY J. 285 W. CENTRAL PKWY., STE. 1730 ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PUPO, ANTHONY J 285 W. CENTRAL PKWY., STE. 1730 ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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03/22/06-80021-008-150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 687, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anthony J. Pupo, Pres/CEO  DATE: 3-10-06 407-389-0587

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR